City of Portland
Benefits Highlights

Health & Financial Benefits
HEALTHY LIVING. HEALTHY FUTURE.

PPA Employees
When does coverage begin?

• Coverage for PPA employees begins 1st of the month following 30-days of service.

Who can be enrolled?

• Spouse
• Domestic Partner
• Children under the age of 26
• Disabled Children over the age of 26
• Child of an eligible child

Supporting documentation will be needed to show dependent’s relationship to the employee and can be uploaded directly to your benefits portal.

When does coverage end?

• For PPA employees coverage ends end of the month following 80 paid hours.

How do I enroll?

• You will be sent an email with instructions on how to access your Benefits portal 1-2 weeks after your start date. Employees without city email will be sent information to their home address.

• Benefits Portal: portlandoregon.gov/benefits

Notice: This Benefits Highlights Guide is designed to provide a quick reference tool and does not imply or constitute an employment agreement. Contracts and other legal documents govern the administration of each plan. In the case of a dispute regarding benefits, the contract or plan document will determine your actual benefits.
## Medical Plans

CityNet & CityHDP (high deductible) medical plans are both health plans administered by Moda Health and utilize the Connexus network. This means you can see any providers in Legacy, OHSU, Portland Adventist and Providence. These plans give you choice and flexibility.

Kaiser Medical is a Health Maintenance Organization (HMO) plan comprised of Kaiser facilities in Oregon and SW Washington and The Portland Clinic. This means you have a point person within Kaiser who helps guide you through your care and the healthcare system.

### CityNet
- Deductible
  - $150/person
  - $450/family
- Out of Pocket Maximum
  - $1,000/person
  - $2,500/family
- 20% Coinsurance after deductible

### Kaiser NW
- No Deductible
- Out of Pocket Maximum
  - $600/person
  - $1,200/family
- Copay System
  - Coinsurance in rare cases

### CityHDP
- Deductible
  - $1,600/person
  - $3,200/family
- Out of Pocket Maximum
  - $3,500/person
  - $7,000/family
- 20% Coinsurance after deductible

With the CityHDP (High Deductible) plan you must meet the deductible prior to the plan paying anything for services including prescriptions. There is no associated employee premium with the CityHDP plan.
Prescription Rx Coverage

Your medical plan choice determines your prescription coverage: CityNet and CityHDP participants have coverage through Express Scripts and Kaiser NW participants through Kaiser NW.

**CityNet Rx**

- **Generic**
  - 10% of Cost
  - $5 minimum $35 maximum copay*

- **Preferred Brand**
  - 20% of Cost
  - $5 minimum $35 maximum copay*

- **Non-Preferred Brand**
  - 30% of Cost
  - $5 minimum $35 maximum copay*

**Kaiser NW Rx**

- **All Medications**
  - 10% of Cost

- **20% Coinsurance**
  - Outpatient administered medications

- **$30 Copay**
  - $30 copay for mail order & 90-day supply

**CityHDP Rx**

- **Generic**
  - 10% of Cost
  - $150 maximum after deductible *

- **Preferred Brand**
  - 20% of Cost
  - $150 maximum after deductible *

- **Non-Preferred Brand**
  - 30% of Cost
  - $150 maximum after deductible *

*30-day supply; CityNet 90-day supply available via mail order or retail with a $5 minimum $50 maximum copay.

CityHDP 90-day supply is up to twice the copay listed above.
CityHDP Maintenance medications are not subject to the deductible.
Vision Coverage

Your medical plan choice determines your vision coverage: CityNet and CityHDP participants have coverage through Vision Service Plan (VSP), utilizing the Signature Network, and Kaiser participants will have Kaiser NW vision. CityNet and CityHDP participants have the option to elect the VSP Buy-Up.

<table>
<thead>
<tr>
<th>VSP Basic</th>
<th>Kaiser NW Vision</th>
</tr>
</thead>
<tbody>
<tr>
<td>$15 Copay</td>
<td>$10 Copay</td>
</tr>
<tr>
<td>1 Exam every 24 Months (adults)</td>
<td>No Visit Limit</td>
</tr>
<tr>
<td>Glasses or Contacts</td>
<td>Glasses or Contacts</td>
</tr>
<tr>
<td>$150/$130 allowance</td>
<td>$150 allowance</td>
</tr>
<tr>
<td>Every 24 months</td>
<td>Every 24 months</td>
</tr>
</tbody>
</table>

VSP Buy-Up

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$15 Copay</td>
</tr>
<tr>
<td>1 Exam every 12 Months (adults)</td>
</tr>
<tr>
<td>Glasses or Contacts</td>
</tr>
<tr>
<td>Every 12 months</td>
</tr>
</tbody>
</table>
Dental Coverage

Your dental coverage is independent of your medical coverage - so if you want to change things up you can! You can choose between Delta Dental with a Buy-Up option or Kaiser NW Dental.

### Delta Core
- **Annual Maximum**: $2,000
- **Routine Services** (i.e. fillings): You pay 20% after deductible
- **Major Services** (i.e. Crowns): You pay 50% after deductible
- **Orthodontia**: 50%
  - **$3,000 lifetime benefit**

### Delta Buy-Up
- **Annual Maximum**: $2,500
- **Routine Services** (i.e. fillings): You pay 20% after deductible
- **Major Services** (i.e. Crowns): You pay 20% after deductible
- **Orthodontia**: 50%
  - **$3,000 lifetime benefit**

### Kaiser NW
- **Annual Maximum**: $2,500
- **Routine Services** (i.e. fillings): No deductible
- **Major Services** (i.e. Crowns): You pay $10 copay
  - **20% coinsurance**
- **Orthodontia**: 50%
  - **$5,000 lifetime benefit**
# Full-Time & Part-Time Rates

## PPA Full-Time Rates

<table>
<thead>
<tr>
<th>Cost per pay period</th>
<th>Employee Only</th>
<th>Employee + 1</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>CityNet, VSP and Delta Dental</td>
<td>$17.40</td>
<td>$33.66</td>
<td>$46.24</td>
</tr>
<tr>
<td>CityNet, VSP and Kaiser Dental</td>
<td>$17.69</td>
<td>$34.64</td>
<td>$47.02</td>
</tr>
<tr>
<td>CityHDP, VSP and Delta Dental</td>
<td>$1.44</td>
<td>$2.48</td>
<td>$4.41</td>
</tr>
<tr>
<td>CityHDP, VSP and Kaiser Dental</td>
<td>$1.73</td>
<td>$3.46</td>
<td>$5.19</td>
</tr>
<tr>
<td>Kaiser Medical, Vision, Dental</td>
<td>$4.92</td>
<td>$11.71</td>
<td>$88.84</td>
</tr>
<tr>
<td>Kaiser Medical, Vision, Delta Dental</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$73.11</td>
</tr>
<tr>
<td>Delta Dental Buy-Up (add this to your total cost)</td>
<td>$4.44</td>
<td>$7.69</td>
<td>$13.66</td>
</tr>
<tr>
<td>VSP Buy-Up (add this to your total cost)</td>
<td>$3.36</td>
<td>$6.10</td>
<td>$8.14</td>
</tr>
<tr>
<td>Opt-Out Dollars</td>
<td>$25.00</td>
<td>$45.00</td>
<td>$62.50</td>
</tr>
</tbody>
</table>

## PPA Part-Time Rates

<table>
<thead>
<tr>
<th>Cost per pay period</th>
<th>Employee Only</th>
<th>Employee + 1</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>CityNet, VSP and Delta Dental</td>
<td>$175.40</td>
<td>$338.17</td>
<td>$463.91</td>
</tr>
<tr>
<td>CityNet, VSP and Kaiser Dental</td>
<td>$178.36</td>
<td>$347.98</td>
<td>$471.77</td>
</tr>
<tr>
<td>CityHDP, VSP and Delta Dental</td>
<td>$134.40</td>
<td>$255.45</td>
<td>$352.04</td>
</tr>
<tr>
<td>CityHDP, VSP and Kaiser Dental</td>
<td>$137.36</td>
<td>$265.26</td>
<td>$359.90</td>
</tr>
<tr>
<td>Kaiser Medical, Vision, Dental</td>
<td>$169.16</td>
<td>$327.18</td>
<td>$485.21</td>
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<tr>
<td>Kaiser Medical, Vision, Delta Dental</td>
<td>$166.20</td>
<td>$317.37</td>
<td>$477.35</td>
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<tr>
<td>Delta Dental (Medical Opt-Out)</td>
<td>$14.35</td>
<td>$24.80</td>
<td>$44.06</td>
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<tr>
<td>Kaiser Dental (Medical Opt-Out)</td>
<td>$17.31</td>
<td>$34.61</td>
<td>$51.92</td>
</tr>
<tr>
<td>Delta Dental Buy-Up (add this to your total cost)</td>
<td>$4.44</td>
<td>$7.69</td>
<td>$13.66</td>
</tr>
<tr>
<td>VSP Buy-Up (add this to your total cost)</td>
<td>$3.36</td>
<td>$6.10</td>
<td>$8.14</td>
</tr>
<tr>
<td>Opt-Out Dollars</td>
<td>$12.50</td>
<td>$22.50</td>
<td>$31.25</td>
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</tbody>
</table>

### Preventive Care Initiative Reminder

Employees who want to enjoy the lowest possible premium share may participate in the Preventive Care Initiative (PCI). To meet the PCI, employees must have a preventive exam every two (2) calendar years. Employees who do not wish to participate have the option to keep the same plan and pay a higher premium share, or they can elect the CityHD medical plan, which has no premium share associated with it.
Flexible Spending Accounts (FSAs)

The HealthCare FSA is a great tool to help pay for out of pocket health expenses for you and your family, and also lower your taxable income. You can pay for copays, dental work, prescriptions and much more using this money. You can carryover any funds between $50 and $500 into the next plan year.

The Dependent Care FSA is a great tool for employees to pay for daycare expenses for their children, or another tax dependent. This money is use it or lose it, so make sure you only allocate the amount of money you will use.

Reduce Your Tax Liability

Use your funds to pay for out of pocket costs such as co-pays, prescriptions, and so much more.

Annual Goal

You pick an allotted amount (your annual goal). This amount is split out between 24 equal paychecks during the plan year.

Rules & Regs

$2,700 or $112.50 for HFSA and $5,000 or $208.33 for DFSA per paycheck is the maximum you can elect for medical expenses each plan year.

WageWorks Healthcare Card

Pay for services or purchases on the same day you receive them by using your healthcare card. Be sure to save your receipts.

Download the EZ Receipts Mobile App

File a claim and upload a picture of your receipt/invoice using your smartphone.
Employee Assistance Program (EAP)

Everyone needs some help at some point. The City of Portland EAP through Cascade Centers is here to do that for you and your dependents. Whether it is receiving 8 free counseling sessions or getting help finding childcare services, Cascade Centers will help you and your dependents.

Go to cascadecenters.com to access career building webinars, tutorials, financial counseling & more.

Be sure to check out LifeBalance - for discounts on movie tickets, vacation discounts, Blazer tickets and many more fun things for you and your family!

Visit lifebalanceprogram.com and enter the activation code CAS2948.

(800) 433-2320
www.cascadecenters.com
Life Insurance

Basic Life
Provided to you by the City of Portland a flat $50,000 Basic Life policy.
You pay nothing for the coverage, and enrollment happens automatically.

Supplemental Life
Provided to you by the City. Enrollment in this plan is optional. The rates are based upon your age.

Dependent Life
Enrollment in this plan is optional for eligible spouses/domestic partners and dependent children.

New Hires and employees who experience a status change have a guarantee issue period and do not have to submit an Evidence of Insurability (EOI) for amounts up to the guarantee issue amounts. Outside of this period, or above the guarantee issue amount, employees and dependents must submit an EOI for approval to Standard Insurance.
PPA employees hired on or after January 1, 2007 are members of the Oregon Public Service Retirement Plan (OPSRP). As an OSPRP member, you will receive Individual Account Program (IAP) contributions made by the City of Portland, on your behalf.

You are vested in the Pension Program on the earliest date in which you complete at least 600 hours of service in each of five calendar years. This means that you collect a pension upon reaching normal retirement age.

For more information please visit oregon.gov/pers.

The City Contributes 9%* of your salary into your IAP Account!

Establish IAP membership after 6-months of service

Normal Retirement Age for PPA OPSRP members is age 60 or 52 with 25 years of service.

PPA Members hired prior to January 1, 2007 are members of the Fire & Police Disability & Retirement pension fund.

For more information please visit portlandoregon.gov/fpdr

*PPA employees receive the 6% employer contributions and an additional 3% optional employer contribution reserved for Police and Fire
## COBRA & Retiree Rates

<table>
<thead>
<tr>
<th>PPA COBRA/Retiree</th>
<th>Total Monthly Cost</th>
<th>Employee Only</th>
<th>Employee + 1</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>CityNet, VSP Vision*</td>
<td>$644.22</td>
<td>$1,253.46</td>
<td>$1,679.42</td>
<td></td>
</tr>
<tr>
<td>CityNet, VSP Buy-Up</td>
<td>$650.94</td>
<td>$1,265.66</td>
<td>$1,695.70</td>
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</tr>
<tr>
<td>Kaiser Medical, Vision*</td>
<td>$607.44</td>
<td>$1,170.30</td>
<td>$1,733.18</td>
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</tr>
<tr>
<td>CityHDP, VSP Vision</td>
<td>$480.20</td>
<td>$922.60</td>
<td>$1,231.93</td>
<td></td>
</tr>
<tr>
<td>CityHDP, VSP Buy-Up</td>
<td>$486.92</td>
<td>$934.80</td>
<td>$1,248.21</td>
<td></td>
</tr>
<tr>
<td>Delta Core Dental Plan</td>
<td>$57.42</td>
<td>$99.20</td>
<td>$176.23</td>
<td></td>
</tr>
<tr>
<td>Delta Dental Buy-Up</td>
<td>$66.30</td>
<td>$114.57</td>
<td>$203.55</td>
<td></td>
</tr>
<tr>
<td>Kaiser Dental</td>
<td>$69.24</td>
<td>$138.46</td>
<td>$207.70</td>
<td></td>
</tr>
<tr>
<td>Kaiser NW Medicare Sr. Advantage Retiree &amp; Kaiser NW Medical Spouse/Dependent</td>
<td></td>
<td></td>
<td></td>
<td>$902.56</td>
</tr>
<tr>
<td>Kaiser NW Medical Retiree &amp; Kaiser NW Medicare Sr. Advantage Spouse/Dependent</td>
<td></td>
<td></td>
<td></td>
<td>$902.58</td>
</tr>
<tr>
<td>Employee Assistance Program (EAP)</td>
<td></td>
<td>$5.25 per month (same for all tiers)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Deferred Compensation

The City of Portland’s Deferred Compensation Program is a voluntary savings plan to help supplement your retirement. You can contribute pre or post-tax. The closer you get to retirement, the more opportunities you have to save.

- **Start, Stop or Change contributions at any time through your Employee self service portal**
- **Submit changes by the 15th to be effective the next month**
- **Contribute Pre-tax or post-tax**
- **Meet with a Voya rep to make investments**

- **2019 Annual Limit $19,000**
- **Age 50+ Annual Limit $25,000**
- **3 Year Catchup Annual Limit $38,000**

Create online access to your account. Meet with a local Voya Rep to review investment allocations or financial planning assistance.

Online appointment system
503-937-0378
Contacts

CityNet or CityHDP
(Administered by Moda Health)
Moda Customer Service
503-243-3974
1-877-337-0649
www.modahealth.com

Express Scripts (ESI)
ESI Customer Service
1-855-889-7760
www.express-scripts.com

Delta Dental Plan
Delta Dental Customer Service
503-265-5680
1-877-277-7280

Vision Service Plan (VSP)
VSP Customer Service
1-800-877-7195
www.vsp.com

Kaiser Permanente
Kaiser Customer Service
503-813-2000
www.kp.org

Employee Assistance Plan (EAP)
Cascade Centers
1-800-433-2320
www.cascadecenters.com

Flexible Spending Accounts
WageWorks
877-924-3967 (877-WageWorks)
www.wageworks.com

Standard Insurance Medical Underwriting
1-800-843-7979
Group Number 488980

Voya Financial
Deferred Compensation
503-937-0378
deferredcomp@lewis-stefani.com

PERS/OPSRP
888-320-7377
www.oregon.gov/PERS

FPD&R
503-823-6823
portlandoregon.gov/fpdr

The Health & Financial Benefits Office
Phone: 503-823-6031
Email: benefits@portlandoregon.gov
Join the Benefits Text Club to get that need to know information by texting “City Benefits” to 31996

Health & Financial Benefits
HEALTHY LIVING. HEALTHY FUTURE.